



# AUSTRALIAN NURSING & MIDWIFERY FEDERATION

ANNUAL REPORT 2016 - 2017



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# FEDERAL PRESIDENT'S REPORT



**Wow! I can't believe that another year has finished and it's time to write the Annual Report once more, reflecting on the activities of the Federation over the past twelve months.**

I am delighted to report that nurses, midwives and assistants in nursing continue to join the Australian Nursing & Midwifery Federation. In the previous twelve months we have reported yet another year of membership growth nationally bringing total membership to 267,948. This amazing growth firmly plants the ANMF at the top of the union movement, making us the largest union in the country.

Our growth means we continue to be a very successful union and our sheer size means we garner respect and hold credibility with Governments and other health stakeholders. Now is the time that we need to use our incredible power to ensure that all members irrespective of the sector in which they work have the best working conditions and we can deliver the best care possible to those who need it.

The Federal Executive and Federal Council continue to meet regularly. These meetings provide the means to address common industrial, professional, political and campaigning issues being faced by the state and territory Branches and also for essential strategic planning for the Federation's future direction.

The Federation continues to foster strong relationships with other peak nursing and midwifery bodies. These important relationships have been forged in order for Australian nurses, midwives and assistants in nursing to have a stronger, consistent voice at a national and international level in respect to a wide range of nursing, midwifery and health matters.

I want to welcome Lori-anne Sharp to the Executive team. Lori-anne was elected unopposed as the Federal Vice President in early 2017. Lori-anne is a Victorian Branch member and registered nurse with over 20 years' experience and is excited and keen to get on with the job at the national level. I too was re-elected unopposed as Federal President in April 2017. These changes meant we farewelled Maree Burgess, former Federal Vice President who decided not to stand for re-election. At Maree's farewell dinner it was unanimously agreed that her calm, common sense approach to all things was her strongest trait and one that we had all benefitted from. Thank you Maree, we love your work!

The ANMF is not a unique organisation, it is a federated union, almost 90% female dominated and one of the only unions growing in Australia. That success is because the members of our union are fearless when it's needed. The state and territory Branches have all campaigned hard over the last twelve months and it's a credit to each Branch that significant progress has been made on behalf of members. I am very confident the next twelve months will be just as busy and exciting for the ANMF.

Finally, along with and on behalf of the ANMF Federal Executive, Federal Council and the ANMF membership, I would like to once again thank all the staff of the Federal Office for their dedication and hard work over the past year. They are clearly committed to the goals of the Federation and the union movement more generally and continue to strive for excellence on behalf of all members.

**Sally-Anne Jones**  
**Federal President**

# FEDERAL SECRETARY'S REPORT



**Success doesn't just come and find you, you have to go out and get it!**

**These are wise words and the sentiment certainly is the case where the ANMF is concerned.**

It's been another full on year in the Federation with each Branch without exception growing, continuing to make the ANMF the largest union in Australia. With a 3.46% increase we are now 267,948 members strong, increasing by a further 10,000 in the last financial year. The growth continues to be unprecedented and recognises the campaigns members become involved in, and since July 2016 there have been plenty.

Starting with the ongoing campaigns in many states to legislate nurse to patient ratios with Queensland and Victoria being successful. Many other state Branches are now keen to follow suit. Unfortunately the battle to set minimum staffing levels in residential aged care marches on, however there are some encouraging signs. The Senate Inquiry handed down its findings regarding the aged care workforce and recommended a minimum staffing level in residential care should be mandated. The ANMF completed the staffing levels and skills mix project and we now know the right number and skill mix of staff required to deliver the best care to elderly residents. The Australian Law Reform Commission released their elder abuse Inquiry which concurred with our view there are not enough staff in aged care and finally investigations into preventable deaths in residential care has also been released. The evidence from all of these reports certainly supports and assists in our arguments that the Government must act to mandate staffing levels and skills mix in the aged care sector.

Violence towards nurses and midwives continues. A sad indictment on our society that frontline nurses and other staff everyday are putting themselves in danger simply by going to work. All Branches are working towards a fix for this issue but it's not easy, with many causal factors and resources a plenty needed to really tackle the problem.

For the 23rd consecutive year nurses have been voted the most ethical and trusted profession, ahead of doctors and other health professionals. It's a great honour that the community holds nurses in such high regard.

The ANMF remains a strong and vocal part of the Australian Council of Trade Unions (ACTU) having been involved in the last national federal election, save our penalty rates and secure work campaigns. Our very own Ged Kearney is the President of the ACTU along with newly elected secretary Sally McManus - having two women running the peak union organisation is new and a great result for the union movement at large.

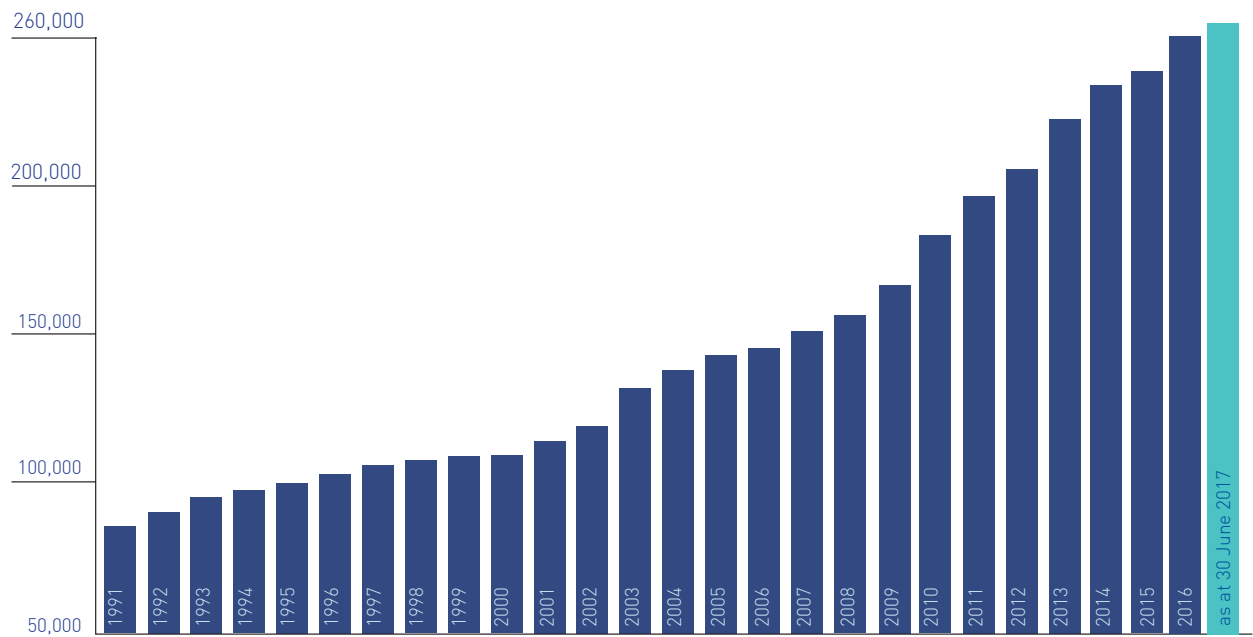
We have had a change in the Federal Officers with Maree Burgess stepping down as Federal Vice President and Lori-anne Sharp being elected to that position effective April 2017. Thank you Maree and welcome Lori-anne!

To the Federal Office staff who continue to work on the priorities of the Federation, industrially, professionally and politically, but not forgetting the communications and education teams, I want to personally thank them all for the ongoing commitment to you, our members, and to the union.

Finally, to my fellow Federal Councillors and in particular Annie Butler, the Assistant Federal Secretary, my thanks go out to you all. Massively hardworking and committed individuals who make a difference every day.

**Lee Thomas**  
**Federal Secretary**

## ANMF MEMBERSHIP 1991 – 2017



# FEDERAL INDUSTRIAL REPORT



**Nick Blake**  
**Senior Federal**  
**Industrial Officer**

**The 2016-2017 industrial program continued to focus on the protection and advancement of the industrial rights of nurses, midwives and assistants in nursing.**

The objectives included:

- To provide effective industrial leadership and representation for nurses, midwives and assistants in nursing at the national level.
- To achieve planned and coordinated salary increases for all nurses, midwives and assistants in nursing in Australia, principally through collective bargaining, and where this is not possible, by seeking review and amendments to the national award(s) covering nurses, midwives and assistants in nursing.
- To maintain and enhance conditions of employment for nurses, midwives and assistants in nursing in Australia.
- To provide support to ANMF Branches to enable them to meet their industrial objectives.
- To develop effective and constructive relationships with the Australian Council of Trade Unions and affiliated unions.
- To develop effective and constructive relationships with the Federal Government, other political parties and industrial bodies.

## INDUSTRIAL REGULATION

The principal law covering the employment of nurses and midwives and assistants in nursing in Australia continues to be the Fair Work Act 2009 (the Act).

In 2016-2017 there were two significant changes to the Act.

### **Fair Work Amendment (Respect for Emergency Services Volunteers) Act 2016**

The government announced its intention during the 2016 federal election campaign to legislate regarding a long-running dispute regarding bargaining at the Victorian Country Fire Authority.

After its re-election, the government introduced a Bill to:

- make terms relating to volunteers in enterprise agreements covering firefighting bodies unlawful;
- enable the government to make regulations to intervene in any disputes involving volunteers at 'emergency management bodies'; and
- allow volunteer organisations to make submissions in Fair Work Commission agreement approval proceedings for enterprise agreements.

### **Fair Work (Registered Organisations) Amendment Act 2016**

On 1 May 2017, the *Fair Work (Registered Organisations) Amendment Act 2016* (the RO Amendment Act) received royal assent. The Act established the Registered Organisations Commission (ROC), which will be overseen by a new Registered Organisations Commissioner (RO Commissioner), and will change the responsibilities and obligations of registered organisations, including increased financial accounting and disclosure obligations for registered organisations and their officers, increased financial penalties and new officer training provisions.

Over this period political parties also introduced a number of industrial legislative Bills into Parliament. These included:

### **Fairer Paid Parental Leave (PPL) Bill 2016**

The purpose of the Bill, which was introduced into the House of Representatives on 20 October 2016, is to amend existing paid parental leave arrangements:

- PPL entitlements will be capped at 18 weeks. Government-funded PPL will be reduced by the number of weeks paid leave workers receive from their employer (in some cases to zero); and
- The mandatory paymaster function will be transferred from employers to the government – effectively converting the entitlement to a social security benefit rather than a workplace right.



ANMF has made a number of submissions opposing these changes. They are available at [www.anmf.org.au](http://www.anmf.org.au)

### **Fair Work Amendment (Repeal of 4 Yearly Reviews and Other Measures) Bill 2017**

End four yearly reviews of modern awards.

Maintain existing limitations of FWC reviewing/ amending awards other than for work value or scheduled annual wage reviews.

Provide the discretion for the FWC to overlook minor procedural or technical errors when approving an agreement.

### **Fair Work Amendment (Protecting Vulnerable Workers) Bill 2017**

Seeks to enhance legislation to prosecute employers who deliberately rip-off low paid workers or aid, abet or conspire to do so (eg. 7 Eleven).

Proposes stronger investigation and evidence gathering powers for the Fair Work Ombudsman (FWO).

### **Fair Work Amendment (Pay Protection) Bill 2017**

Seeks to require employers to pay no less than the rate of pay (and related matters) that is contained in the relevant award.

## **INDUSTRIAL REVIEWS**

### **Four Yearly Review of Modern Awards – Penalty Rates**

The hospitality and catering employers have applied to replace the term ‘penalty rates’ with ‘additional remuneration’ in the hospitality and catering award.

The tribunal has called for submissions on whether such changes (if introduced) should apply across all awards. The ANMF submission is available here: <https://www.fwc.gov.au/documents/sites/awardsmodernfouryr/am2014305-sub-anwf-050517.pdf>.

### **Inquiry into Corporate Avoidance of the Fair Work Act**

In October 2016 the Senate established an Inquiry into corporate avoidance under the Fair Work Act. The Terms of Reference include:

- the use of labour hire and contracting arrangements;
- voting cohorts to approve agreements;
- the effectiveness of transfer of business provisions; and
- whether the NES/Awards act as an effective floor for wages and conditions.

## **AWARDS REVIEW**

The Fair Work Commission’s (FWC) four-yearly review of modern awards, which commenced in 2014, continues.

Substantive proposals made by the ANMF and other parties to vary the modern *Nurses Award* were referred to a FWC Full Bench. The ANMF filed submissions and witness statements in March 2017.

The ANMF proposals relate to in-charge and leading hand allowances, on-call and recall to work, rest breaks between rostered work and meal breaks. ANMF submissions in reply to employer group proposals were filed in May 2017. The employer proposals relate to rostering arrangements, a remote communication allowance and meal breaks. The Full Bench has scheduled hearings for November 2017.

Proceedings also continue to be conducted by various FWC Full Benches dealing with ‘common issues’ that relate to all or most modern awards. Common issues relate to, among other things, family/domestic violence clauses, family friendly working arrangements and a ‘plain language’ rewrite of awards.

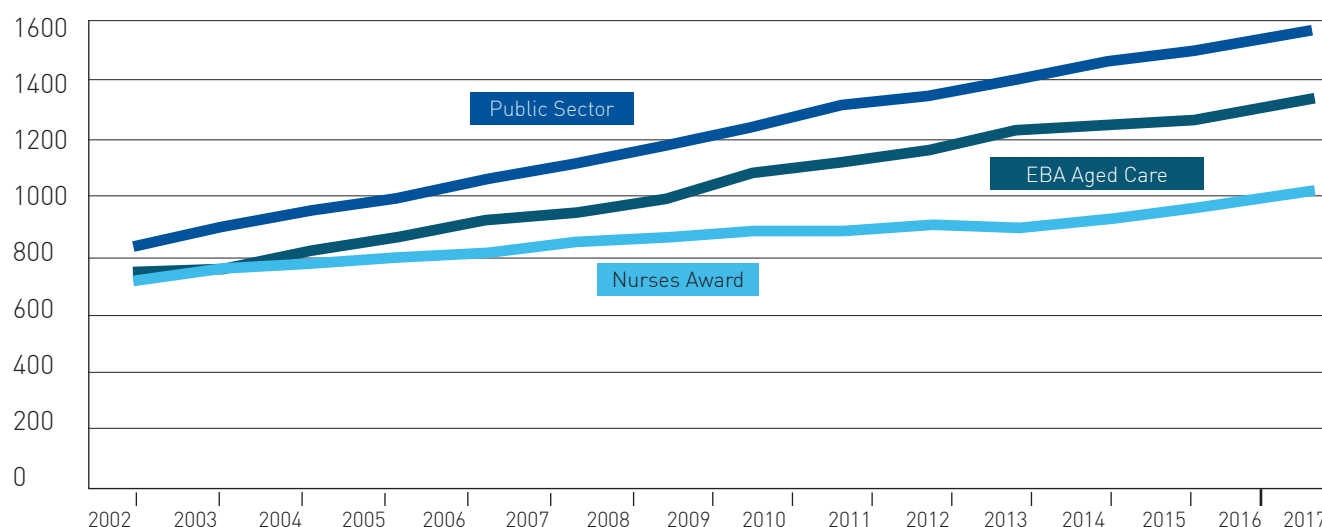
## WAGES

### Aged Care

The wages gap between nurses working in aged care and nurses working in the public sector continues to be a significant barrier to attracting and retaining nurses in the sector.

Across Australia 778 agreements operate in the residential aged care sector covering 2,080 out of 2,417 facilities. While 91% of facilities are now covered by collective agreements, the wages and conditions outcomes are generally less favourable than public sector outcomes and fail to remove or significantly reduce the disparity in wages and conditions.

**NURSING WAGE DISPARITY 2002 - 2017**  
**Public Sector and Aged Care**



### Public sector agreement outcomes

The table below details the percentage increases and expiry dates of public sector enterprise agreements that apply over the 2016/2017 period. In addition to the wage increases detailed, several agreements provide for significant increases to base rates of pay and improved classification structures before general wage increases are applied.

Agreements commonly include a range of improvements to employment conditions including implementation of staffing mechanisms such as nurse to patient ratios; qualification allowances, professional development allowances and leave and shift and rostering arrangements.

The outcomes achieved in the public health sectors of the states and territories are important as they not only establish a benchmark for ANMF negotiations in the private acute and aged care sectors, but also apply to the majority of the nursing workforce.

STATE	OUTCOME	
New South Wales	5%	over 2 years (expires 30.06.17)
Victoria	13.25%-35.25%	over 4 years includes uplift in April 2019 (expires 1.03.20)
Northern Territory	9%	over 3 years (expires 09.08.17)
Tasmania	4%	over 2 years (expires 30.11.18)
South Australia	7.5%	over 3 years (expires 01.09.19)
Queensland	5%	over 2 years (expires 31.03.18)
Australian Capital Territory	12%-15%	over 4 years (expires 30.06.17)
Western Australia	3%	over 2 years (expires 11.10.18)

## Private Acute Hospital Sector

Enterprise Agreement outcomes for nurses and midwives employed in private acute hospitals are, on average, similar to public sector outcomes in the respective State/Territory Enterprise Agreements and now cover 93 percent of private hospitals across the country.

## SEATO NURSES

The ANMF continues to campaign for SEATO nurses who served as part of the civilian surgical and medical teams during the Vietnam War between 1964 and 1972. The nurses, who are suffering from many of the same illnesses and health conditions as the military personnel, have been denied access to entitlements under the Veterans' Entitlements Act (VEA) 1986. This is despite a Review in 2000 which recognised their work was integrated with the defence force and recommended they be given access to repatriation benefits.

## ANMF RULES

The ANMF continues to review and update the Rules to ensure they remain compliant with regulation and meet the needs of the nursing and midwifery labour force.

Over the past twelve months there have been changes to the Rules relating to the Federal Office and Branches responsibilities for the management and reporting of financial arrangements and membership provisions.

These changes have been incorporated into the Rules and are available at:

<http://www.e-airc.gov.au/145v/rules>

### **Application by ANMF to alter its eligibility rule in Tasmania**

ANMF successfully introduced a new eligibility rule in the state of Tasmania in the following terms:

"5.2.7        *In the State of Tasmania employees primarily engaged in providing nursing care under the direct or indirect supervision or at the direction of a registered nurse, registered midwife, enrolled nurse or medical practitioner and who are:*

- a) *Engaged (howsoever titled) as an assistant in nursing, personal care assistant or extended care assistant in a for profit or not for profit residential aged care facility; or*
- b) *Engaged under the Health and Human Services (Tasmanian State Service) Award in the classification as provided for at 1 December 2016 of Health Services Officer (HSO) 4 or 5;*

*Providing that nothing in sub-rule 5.2.7(b) shall render eligible for membership of the Federation employees (howsoever titled) engaged as non-direct care staff, technicians, orderlies, allied health professional assistants, therapists or therapy assistants, or employees engaged in ambulance services."*

The new rule, in addition to providing specific coverage in the Tasmanian public sectors provides eligibility for membership to persons in the residential aged care sectors (however titled), employed to provide nursing care whether they possess relevant qualifications or not.

## NURSING AND MIDWIFERY WORKFORCE

The 2016 nursing and midwifery workforce data published by the Australian Government Department of Health shows there were a total of 369,940 nurses registered in Australia. This comprises 364,632 nurses and midwives with general registration and 5,308 non-practising registrants. Of the nurses with general registration, 84% were registered nurses, midwives and dual registrants, and 16% were enrolled nurses.

However, not all nurse and midwife registrants are in the nursing workforce. In 2016 340,257 nurses and midwives were in the nursing workforce which includes those employed; nurses and midwives on extended leave and those looking for work in nursing or midwifery. There were 315,137 employed nurses and midwives; 89.1% were female; the average age was 44.3 years working on average 33.4 hours per week.

## MIGRATION

Australia continues to be a significant user of offshore nurses and midwives who in 2017 made up around 1.5% of the national workforce. Changes to note include:

### **Abolition and replacement of 457 Visa**

In April 2017, the Australian Government announced it would abolish the 457 temporary skilled visas in March 2018. It further announced the establishment of two new temporary visas; one for two years and one for four years.

In addition to the announcements on temporary skilled migration, the government has reviewed the skilled occupational lists and made significant changes to eligibility for Australian citizenship.

- A new requirement for visa applicants to have at least two years' experience in their profession;
- Only one renewal available for the short term visa and no capacity to apply for permanent citizenship;
- Tighten English Language Standard (ELS) (no changes to nursing or midwifery);
- Labour market testing now required unless this conflicts with international obligations (ie. there is a Free Trade Agreement); and
- Changes to the Skilled Occupations lists include the removal of Mothercraft nurses and Nurse Researchers.

# FEDERAL PROFESSIONAL REPORT



**Julianne Bryce**  
Senior Federal  
Professional  
Officer

The ANMF Federal Professional Team represents the interests of nurses, midwives and assistants in nursing, enhancing the professions and improving the health and wellbeing of the community. The national professional program of work focuses on our central objective, to influence the provision of safe, quality nursing and midwifery care, leading to better health outcomes for all people living in Australia.

The team achieves this by:

- contributing to national health policy and reform of importance to nursing and midwifery;
- advocacy and representation of members' professional interests at a national level through a range of activities; and
- providing evidence and making submissions on professional issues to governments and other authorities on behalf of members.

The professional team has well-developed collegial relationships across the breadth of national nursing and midwifery organisations, working together to progress issues critical to our members and society in general.

## Professional Advisory Committee

The major function of the Professional Advisory Committee (PAC) is to make recommendations consistent with the professional objectives of the Federation, for consideration by the ANMF Federal Executive and Federal Council. Membership of the PAC includes the professional officer/s from each state and territory Branch and the Federal Office. The federal professional team convenes, chairs and provides the secretariat for this committee. The scheduled four meetings per year are conducted face to face (two meetings) and via teleconference (two meetings).

## Coalition of National Nursing and Midwifery Organisations

Founded by the ANMF in 1991, the Coalition of National Nursing and Midwifery Organisations (CoNNMO) consists of 55 national nursing and midwifery member organisations. The ANMF Federal Office has held a long-standing funding agreement with the Australian Government Department of Health to undertake Secretariat operations of CoNNMO as the auspicing body. In May 2017, the ANMF secured on-going Australian Government funding for a further three years.

## Early Career Nurses and Midwives Employment

In 2014 the ANMF convened a National Graduate Nurse and Midwife Roundtable with key stakeholders to discuss and develop solutions to secure employment opportunities for early career nurses and midwives. All participants agreed there was a high proportion of unemployment in newly graduating nurses and midwives, the causes of which are complex and varied. It was decided further work, which focused on addressing the key causes, was required. Subsequently, a Working Group was formed and has met bi-monthly to progress the work commenced at the original roundtable. The second early career nurse and midwife roundtable was held in December 2016. Participants were provided with an update on the work completed by the Working Group to date, presentations on the latest research on graduate support, collaborative programs, and a panel discussion on the future sustainability of graduate employment. The Working Group continued to meet throughout 2016-2017.

## **SOCIAL JUSTICE**

### **Reconciliation Action Plan**

The Reconciliation Action Plan (RAP) Working Group monitored progress on the Federal Office Innovate RAP which has been endorsed by Reconciliation Australia. The RAP states our vision for reconciliation to achieve health equality for Aboriginal and Torres Strait Islander peoples. In so doing the RAP articulates our commitment to participating in activities which contribute to working towards closing the gap on health equality. Within the spirit of our RAP, Federal Office continued to work closely with our colleagues at the Congress of Aboriginal and Torres Strait Islander Nurses and Midwives (CATSINaM) to realise our mutual vision for reconciliation and progress policy issues of mutual concern.

### **Anti-Poverty Campaign**

The ANMF Federal Office provided funding support for Anti-Poverty Week awareness raising campaign held in October 2016. This campaign, held annually, promotes awareness amongst all Australians of the struggles facing those people in our community living with poverty on a daily basis. This support is provided on behalf of ANMF nursing and midwifery members, many of whom have personal interaction with marginalised groups in this country whose health is affected by deprivation and vulnerability due to poverty. Federal Office attended the Social Determinants of Health Alliance Oration held in Melbourne to mark Anti-Poverty Week. Delivered by Prof John Eastwood, Director of the Central Sydney Healthy Homes and Neighbourhoods Integrated Care Initiative, the oration described sector wide approaches that aim to break intergenerational cycles of poverty and poor life outcomes.

## **PROFESSIONAL PARTNERSHIPS**

### **National Registration and Accreditation**

During 2016-2017 the ANMF federal professional team participated on a number of expert advisory committees, research teams and working groups associated with projects conducted by the Nursing and Midwifery Board of Australia (NMBA) and the Australian Nursing and Midwifery Accreditation Council (ANMAC).

These projects included, review of the:

- NMBA Registered Midwife Standards for Practice;
- NMBA Codes of Conduct and Professional Boundaries for Nurses and Midwives;
- NMBA Codes of Ethics for Nurses and Midwives;
- ANMAC Enrolled Nurse Accreditation Standards; and
- ANMAC Registered Nurse Accreditation Standards.

### **Climate Change**

As a member of the Climate and Health Alliance (CAHA), the ANMF contributed to development of a discussion paper *Towards a National Strategy on Climate, Health and Well-being for Australia*. This paper was used to lobby politicians in a Climate Change Health Leaders Meeting and roundtable forum in Canberra, in October 2016. Representatives of leading health organisations, including the ANMF, attended the day at Parliament House to seek commitment and action by politicians to protect the health of Australians from the impacts of climate change. A Framework to guide implementation of the National Strategy was subsequently developed by CAHA, and launched at Parliament House in June 2017, with co-sponsorship of the event across the major political parties. The ANMF continues advocacy work, individually and in conjunction with CAHA, highlighting critical adverse health effects from climate change, and urging the adoption of a national plan for environmental sustainability.

### **Nursing in Primary Health Care**

The Australian Primary Health Care Nurses Association (APNA) has been funded by the Australian Government Department of Health to deliver the Nursing in Primary Health Care (NiPHC) Program over a three year period (2015-2018).

ANMF continues to participate on the Expert Advisory Group (EAG) for this program. The EAG met in November 2016 and April 2017 to provide advice on the progress of the four projects. In late 2016, Federal Office and a number of Branch Professional Officers attended consultation workshops held across the country for the development of the Education and Career Framework.



## Digital Health

Led by the Australian Health Ministers' Advisory Council and the National Health CIO Forum, a Standards Australia committee has developed a handbook of digital hospital design principles to inform the design of new or refurbished health facilities. The ANMF participated as a member of the committee.

The Australian Digital Health Agency established a steering group with key stakeholders to provide independent advice for the Agency's Medicines Safety Programme. The programme has four main objectives, namely: to undertake a scan of the current and planned digital activities that support access to safer medicines; to identify any existing Agency projects that should be governed by the programme; to identify new priority areas; and, to develop a sector-wide digital Medicines Safety Programme roadmap. The ANMF is represented on this committee, with meetings held December 2016 and February 2017.

The ANMF is a member of the Australian College of Rural and Remote Medicine (ACRRM) Telehealth Advisory Committee (ATHAC). This committee, established by ACRRM in 2013 as part of the Australian Government funded national telehealth initiative, meets by videoconference quarterly. Whilst the funding for the establishment of telehealth support arrangements has ceased, ACRRM has maintained and expanded this committee to promote telehealth. ATHAC is a national collaboration to share information and ideas regarding clinician support to encourage telehealth to be incorporated into routine clinical practice for eligible patients. The ACRRM Digital Health Committee, is now looking to further broaden the scope of ATHAC to include other aspects of digital health.

## Australian Government Scholarships

The ANMF Federal Office has continued on the Australian College of Nursing managed Nursing and Allied Health Scholarship Selection Scheme Advisory Group; and, participated as assessors of nursing and midwifery scholarship applications for a variety of undergraduate, post graduate and CPD streams.

In May 2017 the Australian Government announced, following a selective tender process, a consortium of the rural workforce agencies will administer the new Health Workforce Scholarship Programme. This will combine all existing health workforce scholarships into one programme with a single administrator.

## National Health Support Scheme for Nurses and Midwives

The ANMF participated on an Expert Advisory Group chaired by *Turning Point*, the organisation commissioned by the Nursing and Midwifery Board of Australia (NMBA) to develop a national health impairment program for nurses and midwives. The new service, launched in March 2017, is a telephone and online service providing a first point of contact and referral to relevant other resources, for nurses, midwives, and students of nursing and midwifery programs, employers or educators.

## Quality Use of Medicines

As a founding member organisation of NPS Medicinewise, the ANMF offers ongoing support for the vital work of promoting wise use of medicines. We liaise with the nurse on the NPS Medicinewise Board, assist in disseminating information to our large membership, and participate in forums. A major contribution by ANMF is through chairing the National Medicinewise Nurse Insight Group, which has met on an annual basis for the past four years. This group of expert nurses, from a range of clinical areas, provides advice to the NPS on current and proposed programs on quality use of medicines and therapeutic testing. A wide range of issues formed the agenda of this group in 2016, such as: Biosimilar medicines (similar in structure to medicines on the market but not the same chemical make-up); Pharmaceutical industry influence on choice of medicines and/or therapeutic testing devices; De-prescribing and the role of nurses in encouraging this for inappropriate medicines; NPS Medicinewise interventions and programs: COPD, Hepatitis C; Antibiotics awareness campaign; the Choosing Wisely program, and, nursing care specific medicines matters.

The ANMF is a long standing member of the Australian Commission on Safety and Quality in Health Care (ACSQHC) Health Services Medication Expert Advisory Group (HSMEAG) which meets quarterly. This group is responsible for oversight of the National Inpatient Medication Chart. In 2016-2017 issues for discussion at the meetings included: the national subcutaneous insulin chart; electronic medication management systems; national digital health infrastructure; antimicrobial stewardship; neuraxial connectors; the user-applied labelling standard issues register; new oral anticoagulant medicines; the national guidelines for on-screen presentation of medicines information; and, the national guidelines for on-screen presentation of discharge summaries.

Federal Office was invited by the ACSQHC to participate in a group convened in August 2016 for a roundtable meeting to discuss the work required to support the introduction of new neuraxial connectors in Australia. This international initiative is being undertaken in response to fatal adverse events involving medicines errors where administration intended for the intravenous route was given intrathecally. Following the roundtable, the Commission and the Australian and New Zealand College of Anaesthetists developed a joint statement supporting the introduction of neuraxial connectors that comply with International Standards ISO 80369-6:2016 for neural devices as an important adjunct to improving patient safety. The joint statement was endorsed by all the organisations in attendance at the roundtable and made available on the Commissions website at the beginning of 2017.

### **Aged Care**

In late 2016, the Australian Aged Care Quality Agency established a new national group, the Quality Agency Liaison Group (QALG). The ANMF is represented on this group. The QALG is a key mechanism for formal Quality Agency liaison with national organisations representing consumers, aged care providers and employees in aged care. The group met twice in the 2016-2017 period.

### **Palliative Care**

A National Palliative Care and Advance Care Planning Advisory Group has been established to provide expert advice for a 12 month Australian Government funded project.

Its objectives include providing specialist palliative care and advance care planning to aged care providers and GPs caring for people receiving aged care services. It aims to improve linkages between aged care services and palliative services; improve skills and improve quality of care for aged care recipients. The ANMF was represented on the Advisory Group for the project which met for the first time in February 2017.

### **Safety and Quality**

In 2016, the ACSQHC commenced development of a National Model Clinical Governance Framework. The Framework describes how leaders of health service organisations implement integrated corporate and clinical governance systems through which organisations and individuals are accountable to the community for continuously improving the safety and quality of their services and ensuring they are patient-centred, safe and effective. The Commission established a Panel to provide advice and oversight of the development of the Framework, the supporting implementation and communication strategy, and compendium aids. The ANMF representative on the Advisory Panel was Federal President, Sally-Anne Jones. The Panel met three times during its term. Following approval by the ACSQHC Board, the Framework and supporting documents were forwarded to the Australian Health Ministers' Advisory Council for endorsement in December 2016.

### **Stigma and Discrimination**

The Australasian Society for HIV, Viral Hepatitis and Sexual Health Medicine (ASHM) project is a collaboration of health services, research and community partners to address systemic barriers, stigma and discrimination experienced by people living with HIV, hepatitis B and hepatitis C, accessing the health system. The ANMF Federal Office was invited to be a member of the Nursing Working Group for this project in February 2017. A free online learning module for primary health care nurses is being developed as part of the project to raise awareness of stigma and discrimination experienced by people living with blood borne viruses (BBV), to enable nurses to reflect on potential structural workplace barriers and individual perceptions. Learnings from the module will encourage opportunities for practical and procedural change within primary health care settings where required.



## Safety and Security

Early 2016, CRANApplus received funding from the Australian Government Department of Health to conduct a 12 month Safety and Security Project to be completed June 2017. ANMF participated as a member of the Expert Advisory Group for the Project. Deliverables included: a literature review; safety and security guidelines for remote health practice; an industry handbook on 'Being Safe in Remote Health'; a safety and security self-assessment tool; a free online learning module on 'Working Safe in Remote Practice'; and, a 'Being Safe in Remote Health' information sheet loaded on the CRANApplus App. The *Safety and Security Guidelines for Remote and Isolated Health* were released in May 2017.

## Rural Health

The ANMF is one of seven founding members of the National Rural Health Alliance (NRHA). In April 2017, the NRHA held the 14th National Rural Health Conference, *A World of Rural Health*, in Cairns, immediately followed by the 14th World Rural Health Conference. Led by the ANMF, and sponsored by James Cook University, the nursing and midwifery organisations represented on the Alliance jointly conducted a pre-conference workshop for nurses and midwives, titled 'Rural and Remote Workforce Sustainability – is it possible?'. Beth Mohle, Queensland Nurses and Midwives' Union, represented the ANMF on the panel for the workshop, which was well attended with 64 participants. Following the panel, the group work discussion at the workshop generated five recommendations which were added to the overall conference recommendations.

## SUBMISSIONS

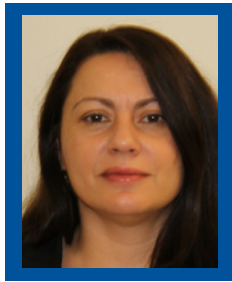
The federal professional team analysed draft policy documents and consultation papers circulated by a range of government, nursing and midwifery organisations and other external bodies. Some of these issues also involved participation in consultation forums.

Policy forums attended in 2016-2017 included:

- the National Scheme Stakeholder Consultation Forum on the Draft Health Practitioner Regulation National Law Amendment 2017 (Stage 1 Amendment Bill);
- the Australian Government Department of Veterans' Affairs (DVA) Consultative Forum;
- the Australian Government Department of Health Streamlining Aged Care Accreditation Workshop;
- the Private Health Insurance Ministerial Advisory Committee Rural and Remote Workshop;
- the Advanced Practice and RN/Midwife Prescribing Symposium;
- the Review of the National Registration and Accreditation Scheme (NRAS) Accreditation Systems Consultation Forum; and
- the Australian College of Nursing Inaugural Policy Summit.

During the 2016-2017 financial year period the professional team prepared twenty national submissions (papers and letters) in conjunction with state and territory Branches and reviewed and rewrote 23 national policies and positions statements.

# **CAMPAIGN AND POLITICAL REPORT**



**Sue Bellino**  
*Federal Political  
Director*

**There is never any predicting what a politician will do! Never a truer word has been spoken.**

Over the past 12 months there have been some wins for our members with the Senate Cross Bench blocking legislation which would have significantly impacted on nurses, midwives and assistants in nursing/carers. The current composition of the Senate with a high

number of Cross Bench Senators has meant that delegations of members are critical to providing real life stories and examples on how some of the more regressive aspects of Federal Government legislation will impact their lives.

In practice, extensive lobbying was undertaken of the Cross Bench Senators on proposed cuts to paid parental leave (PPL) and the impact on our members. In the end, the Coalition was not able to secure the passage of these cuts to PPL through the Senate.

## **AGED CARE CAMPAIGN**

At the February 2017 Federal Executive meeting it was resolved to begin preparations for a federal aged care campaign to be launched in late 2017, and lead into the next federal election to be held no later than 2 November 2019.

With the release of the National Aged Care Staffing and Skills Mix Project Report, the first of its kind in Australia, the campaign will focus on staffing levels (the right number) and skills mix (the right qualification) for residential aged care. The campaign will aim to highlight the lack of safe staffing in the sector, and reinforce the recommendations from the Report.

### **Building the Case to Achieve Political Change**

There is no champion for aged care in the Federal parliament. There has not been enough pressure from the wider community to engender political change or to be concerned enough to take action in aged care.

The campaign will need to be strong enough to:

- 1) Collect stories from the community on the crisis and have them get involved in the campaign, including community action.
- 2) Highlight the crisis in aged care and tell the stories of the residents.
- 3) Activate our members, supporters and the community and grow the membership.
- 4) Secure a commitment to staffing ratios and the correct mix of staff in aged care from political parties during the election campaign.

### **Aged Care Corporate Research**

The ANMF has commissioned a project to conduct in-depth research on the major for-profit providers of Aged Care in Australia with publicly available information to identify government funding, estimated market share by state, growth plans, profit levels, tax paid, executive remuneration, brief profiles of directors and/or major shareholders/owners, company structure, related businesses and other relevant information.

A detailed written report will be provided as well as a presentation and discussion of the findings with recommendations for further research and campaign opportunities.

The detailed research report would be produced over 3 months on the 7 key operators (dependent on available information). The report would include an initial survey of 4 private for profit aged care operators, depending on available information. Information and analysis on the overall dynamics of the for-profit aged care sector will also be included.

## **NATIONAL MEDIA AND COMMUNICATION OFFICERS**

The Federal Office convened a national meeting of Branch media and communications officers held at the NSW NMA in February 2017. Discussion was held around a communications strategy for the aged care campaign and the necessary development of campaign material.

## AGED CARE REVIEWS AND INQUIRIES

### Senate Inquiry into Aged Care Workforce Issues

The ANMF made a submission to, and appeared before this Senate Inquiry. Lee Thomas and Annie Butler met with the Chair of the Senate Inquiry, Senator Rachel Siewert, and provided a copy of the National Aged Care Staffing and Skills Mix Project Report for the Inquiry's deliberations. A media release was distributed and the report was shared on social media.

Some of the recommendations arising from this inquiry will be helpful to our aged care campaign objectives.



### Elder Abuse – A National Legal Response (FED) Report

The Australian Law Reform Commission (ALRC) launched its Report, Elder Abuse - A National Legal Response (ALRC Report 131), on World Elder Abuse Awareness Day 2017. The ALRC was asked to consider Commonwealth laws and legal frameworks and how they might better protect older persons from misuse or abuse, and safeguard their autonomy. The Report includes 43 recommendations for law reform. The overall effect will be to safeguard older people from abuse and support their choices and wishes.

The ANMF and some Branches provided submissions to this Inquiry. A chapter in the final report was dedicated to aged care. The ANMF, QNMU and NSWNMA were some of the stakeholders who raised issues such as quality of training, lack of qualified staff, wages and conditions of aged care staff all of which are referred to in the final report.

### Review of the National Aged Care Quality Regulatory Processes

An independent review of Commonwealth aged care regulatory processes was announced in response to the Oakden Report which detailed failures in the quality of care delivered at the Oakden Older Persons Mental Health Service in South Australia.

The Review will examine why regulatory processes did not adequately identify the systemic and longstanding failures of care at the Makk and McLeay wards documented in the Oakden Report. The Review will also identify improvements to the regulatory system that would increase the likelihood of immediate detection, and swift remediation by providers.

The Review is being led by Ms Kate Carnell AO in conjunction with Professor Ron Paterson ONZM. At this stage, public hearings will not be held and any concerned person is being invited to fill in a survey online. ANMF members and the community have been invited to fill in the survey via ANMF social media pages.

### Research into Preventable Deaths in Aged Care

New Research into Preventable Deaths in Aged Care was launched on Tuesday 30 May 2017. The research, collated from the Coronial investigations into nursing home deaths over the past decade, was carried out by Monash University Professor Joseph Ibrahim and published in the *Medical Journal of Australia*.

This research showed that the number of deaths in nursing homes from preventable causes has increased by 400 per cent over the last 13 years and again highlights the urgent need for mandated nurse and carer to patient ratios. The Federal Office distributed a media release in respect to this research, which revealed how many deaths there are in nursing homes that just "shouldn't be happening".

## **PENALTY RATES CAMPAIGN**

The ANMF continues to support the campaign to restore penalty rates for workers (retail, hospitality and pharmacy) as well as highlighting that other workers could become the next to have their rates cut. Federal Office supported the announcement by the Federal Labor Party to restore penalty rates should they form government at the next election.

Penalty rates continues to have strong traction on social media amongst our members and supporters.



## **ANMF AGED CARE DELEGATION**

On Tuesday 28 March 2017 Federal Office organised a delegation of aged care nurses and assistants in nursing to travel to Canberra and meet Opposition Leader Bill Shorten and raise their concerns about the potential impacts of penalty rates cuts on them, their families and their work.

## **SONIC HEALTH PLUS**

The ANMF Federal Office supported the QNMU on social media and via a media release, raising concerns over the attempt by Sonic Health Plus to reduce the Sunday penalty rates of its nurses by 24% in an enterprise bargaining agreement.

The ANMF continues to maintain that this was a 'start of the slippery slope' for nurses working in so-called "non-essential" areas of the health service delivery.

The online campaign was supported heavily by other unions, the ACTU and nursing groups and members. Sonic Health Plus withdrew their attempt to reduce penalty rates for nurses within a few days.

## **BORDER FORCE ACT**

On 20 October 2016, the ANMF welcomed the Federal Government's backdown over the Border Force Act, and the threats to jail health professionals who publicly spoke about the poor conditions experienced by asylum seekers in offshore detention centres.

The ANMF had conducted a nation-wide campaign against the Border Force Act 2015, which had threatened health workers with jail terms of up to two years, and fought against the 'gag order' placed on our members under the Act.

## **GENDER SEGREGATION IN THE WORKPLACE AND ITS IMPACT ON WOMEN'S ECONOMIC EQUALITY – SENATE INQUIRY**

The ANMF filed a submission to this Inquiry and appeared at the hearing. The ANMF Assistant Federal Secretary and Political Director highlighted to the Finance and Public Administration References Committee that the continuing gender division of labour and the increasing gap between male and female wages was a major concern for ANMF membership.

As part of the submission and advocacy, Federal Office also highlighted the 'double disadvantage' of the aged care industry, with members working in an undervalued and underpaid occupation, that is not adequately resourced or recognised, and the growing wage gap for this significant group of members.



## PAID PARENTAL LEAVE INQUIRY

Federal Office Political Director, Senior Federal Industrial Officer and member Phoebe McDonagh appeared before the PPL Senate Inquiry for the ANMF on 1 February in Melbourne.

Despite a number of attempts by the Turnbull Government (and former Abbott Government) to have these cuts to PPL passed by the Senate, they were eventually abandoned in Budget 2017. Essentially the lobbying of the Cross-Bench Senators undertaken by the ANMF, Branches and other unions and supportive groups, blocked these cuts in the Senate.

The ANMF members throughout Australia stood to lose significantly if these cuts to PPL were passed. Many of our members joined the campaign and lobbied with us, told their stories, and visited politicians to stop these cuts.

## FEDERAL BUDGET 2017

Once again the Federal Budget was a disappointment to ANMF members. The Turnbull Government announced winding back the freeze of the Medicare rebate, however, as it will not be completely lifted until 2020 it means that those visiting a GP or specialist will be hit with the higher costs for some time.

The Federal Budget saw no extra funding for aged care, no reversal of the \$1.2billion in funding cuts from the previous MYEFO announcement, and no relief on workloads.

University fees were increased and students will now have to pay back their HECS debt sooner as the budget cut the income threshold down to \$42,000. This will disproportionately affect nursing and midwifery students.

## DO NO HARM – WHAT IS THE HIDDEN COST OF YOUR HEALTHCARE?

The ANMF launched the *Do No Harm* report into procurement of medical goods by Australian companies and government.

The report is on the ANMF website which includes an explanation of exploitation in medical goods supply chains and the actions government and companies should take.

The ANMF distributed a media release on the release of the report and shared it on social media platforms.

**What is the Hidden Cost of your Healthcare?**

**DO NO HARM?**

**New Report: Procurement of Medical Goods by Australian Companies and Government**

There are hidden costs in the production and procurement of medical goods by Australian companies and the public sector: mounting evidence shows that there is a high occurrence of labour and human rights abuses in the production of goods such as gloves, surgical instruments, clothing, footwear and electronics. The production of these healthcare goods is tainted by hazardous working conditions, labour exploitation, child labour and other abuses.

**Exploitation in Medical Goods Supply Chains | [View PDF](#)**

The existence of human rights abuses in medical goods supply chains has implications for Australian healthcare companies and public procurement, as the health and well-being of Australians should not come at the cost of the abuse and exploitation of workers in low-wage countries.

**Campaigns**  
[Federal ANMF Campaigns](#)  
[Campaigns supported by ANMF](#)  
[ANMF Branch Campaigns](#)

**► Read**  
[Read full report](#)

**► How You Can Help**  
[What you can do](#)

**► Find Out**  
[What ASX companies should do](#)

**► Find Out**  
[What the Government should do](#)

# FEDERAL EDUCATION REPORT



**Jodie Davis**  
**Federal Education  
Officer**

## CPE WEBSITE

In December 2016 the ANMF Education Team launched a new platform for our Continuing Professional Education (CPE) website. A new provider was engaged to allow us to provide the latest technology to house our content. We can now offer all users:

- A resources section with links to the latest health care information.
- Live streaming of selected conferences, including international conferences.
- Active links to all our Branch websites and contact information.
- Active links to the Federal Office website, ANMF policies and position statements and the three ANMF online learning programs housed on the Federal Office website.
- A detailed learning plan for users to outline their learning goals and diarise a plan of learning, including the use of a perpetual calendar, to achieve their identified learning requirements.
- Access to certificates of achievement, an archive section to house past learning certificates, which can be accessed at any time.
- An NMBA compliant detailed Continuing Professional Development (CPD) portfolio that can be printed or emailed.
- An area for recording CPD activities attended outside of the CPE website.
- An area for recording the achievement of clinical education.
- A search wheel of education available for specific areas of the professions to allow easy access to relevant topics: RNs, RMs, NPs, ENs and AINs.

All CPD records and user accounts recorded over the past ten years remain active and accessible via the new website.

Since the inception of the new website we have added a number of new courses and either reviewed or rewritten all of the remaining courses. We currently have 58 courses and one conference available.

## AGED CARE TRAINING ROOM (ACTR)

Our ACTR remains popular with nurses and AINs working in the aged and community care sectors. There are now over 60 courses available, with a number of new topics recently introduced.

Access to the ACTR is by annual subscription only, which gives subscribers access to all content and areas pertaining to the recording of CPD participation evidence, such as a learning plan, certificates, achievement portfolio and enrolment every two months into a peer reviewed annual learning plan to ensure users achieve their hours of CPD for ongoing registration each year.

Many nurses working in the acute and primary care settings and those working across multiple sectors such as agency nurses, have requested access to specific topics available on the ACTR to assist them in caring for older people.

The ANMF Education Team began planning in early 2017 to bring across some topics from the ACTR to the CPE website to address members expressed needs for access to specific aged and community care education.

## BODY SYSTEMS TRAINING ROOM (BSTR)

The BSTR remains the very best online learning website for topics requiring detailed knowledge of human anatomy and physiology, disease manifestation and treatment.

The BSTR has added a number of new topics over the past 12 months and continues to be accessed by many Australian nurses and midwives, and particularly students.

## ONLINE CLINICAL SIMULATION FOR NURSES AND MIDWIVES

This site continues to be popular for nurses and midwives wanting to update or polish their skills in clinical procedures. It offers 32 clinical procedures relevant to nurses and midwives clinical practice such as; performing ECGs, injections, cannulation, pap smears, etc.

The website provides detailed anatomy and physiology of the areas relating to the specific procedure with a cadaver view available and is capable of drilling right down to a microscopic view. There is an instructional video, a practice area and an area to assess competence. All activity on the website is timed to provide evidence of participation.

## VOCATIONAL EDUCATION AND TRAINING (VET) SECTOR

Members of the ANMF VET Advisory Committee (VETAC) continue to work with SkillsIQ by representing nursing in the new system of training product development which commenced on 1 January 2016.

VETAC members are involved in the following Industry Reference Committees (IRC's):

- Enrolled Nursing
- Direct Client Care and Support
- Technicians and Support Services
- Aboriginal and Torres Strait Islander Health Worker
- Dental

The IRCs operate as committees of the Australian Industry and Skills Committee (AISC). IRCs are responsible for directing their allocated Skills Service Organisation (SSO) in developing business cases to request the commissioning of training package development work to meet the skills needs of industry. IRCs also have responsibility for gathering industry intelligence to inform training product development. They oversee development and review of training packages, including preparation of cases for endorsement and provide sign-off on completed training packages, prior to submission to the AISC for endorsement.

# AUSTRALIAN NURSING & MIDWIFERY JOURNAL



**Kathryn  
Anderson**  
*ANMJ Editor*

**It has been an exciting 12 months for the ANMJ team exploring new ways of publishing its content online. We are living in a digital age and ensuring the journal remains contemporary in a changing global environment is very important.**

To increase views of the journal online, the ANMJ team and state and territory Branches implemented a number of strategies.

This included the current format of the ANMJ becoming freely available to view to all nurses and midwives across the country rather than to specific members from states and territories who subscribed to the journal.

Additionally, South Australia, Victoria, Northern Territory and the ACT Branches offered 'opt out' options of the paper version of the ANMJ to their members with the Tasmanian Branch trialling an 'opt in' option of the paper version to their members.

Working with the state and territory Branches the ANMJ team has also developed more strategic ways of promoting the online version of the ANMJ. This has included a supply of art work, words and facebook posts to the Branches for them to use in their own member communications each time the journal is published.

Additionally, the ANMJ has been promoted more strategically on the ANMF Federal Office's social media Facebook and Twitter platforms.

After implementing the above approaches we have noticed a gradual increase in reads of the journal online. Available data suggests there has been an average of 2,000 reads of the journal online per month over the past six months. This is in contrast to an average of 140 reads of the journal before these strategies were implemented. As we continue to improve the ANMJ's online presence we anticipate a significant increase in this figure over the next 12 months.

During the year we contracted a part time advertising manager based in Melbourne who has worked closely with the ANMJ team to purposefully improve advertising. Working in this new way has seen a significant increase in advertising revenue. It is anticipated with a greater online presence advertising will continue to grow to help cover the costs of the journal.

Over the year the journal has maintained 48 pages per issue. This has provided a good balance of advertising to editorial copy and has allowed contributions from members in various sections of the journal, from letters and 'working life' articles to issues, viewpoints, focus section and clinical updates.

Using the tools at our disposal, the ANMJ has continued to keep abreast of the latest happenings in the nursing and midwifery professions over the past year with some significant highlights in 2016-2017.

The ANMJ has reported on key issues for the ANMF including our involvement in the Assisted Dying campaign and safe staffing issues in aged care.

In addition, violence against healthcare workers in hospitals and changes to penalty rates in retail and hospitality were some of the prominent news stories. Social justice, Indigenous health, and environmental health remained common themes throughout the year.

## FEATURE

Features remained popular with the membership. Particularly popular features included, *Ground zero: Standing up against violence in our healthcare sector*, *Off the beaten track: The rise of remote area nursing* and *Nurse Practitioners: The road less travelled*.



### **ANMJ feature articles in 2016-2017:**

- Ground zero: Standing up against violence in our healthcare sector
- Advance practice nursing: A level in its own right
- All hands on tech: How digital technology is redefining healthcare
- Chronic disease crisis: Why prevention is better than cure
- Nurse Practitioners: The road less travelled
- Death and dignity: Why voluntary euthanasia is a question of choice
- Off the beaten track: The rise of remote area nursing
- Pacific power: Nursing partnerships across the blue continent
- On the front line: The rewards of life as a military nurse
- Diabetes: A ticking time bomb
- Beating the odds: How indigenous nurses and midwives are closing the health gap

### **FOCUS**

Focus topics reflected the diversity of the areas in which nurses and midwives work, both clinically and geographically. Many of the areas covered were of broader areas of concern to members and in which the ANMJ received many submissions, such as education ran over two issues.

#### **Focus topics 2016-2017**

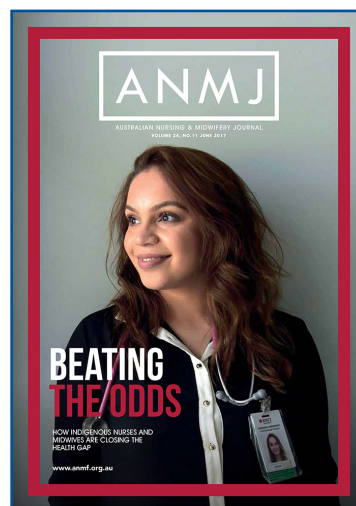
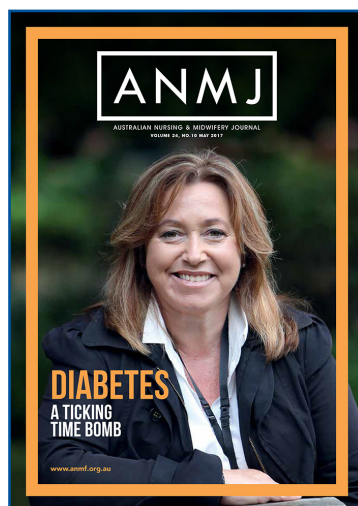
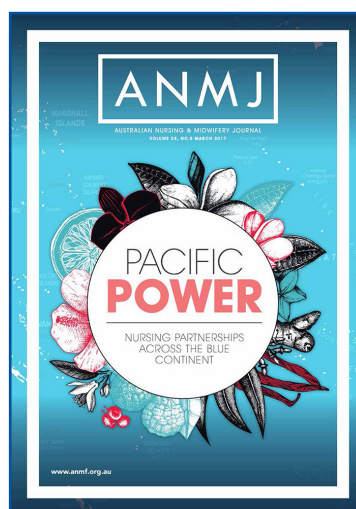
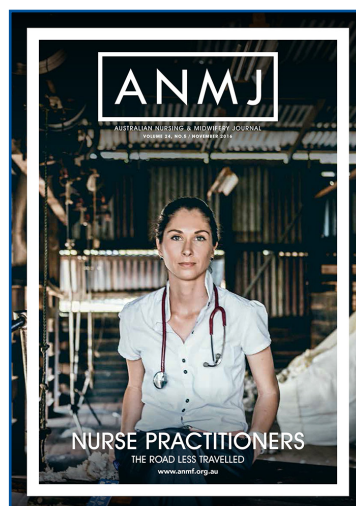
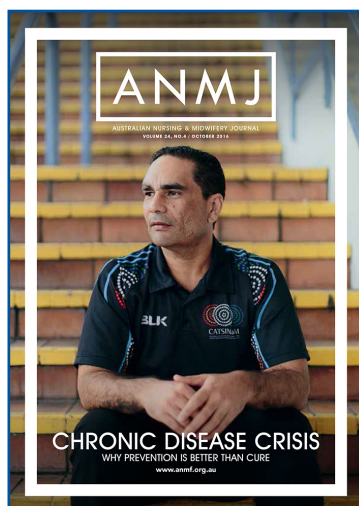
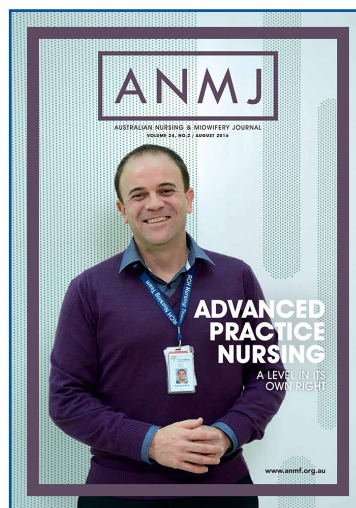
- Women's Health
- Primary/Community healthcare
- Education Part 1
- Education Part 2
- Men's health
- Drug and alcohol nursing
- Aged Care
- Infection prevention and control practices/ wound care
- Indigenous health
- Peri/post op care
- Maternal health

### **CLINICAL UPDATE**

We have continued to receive a constant flow of submissions for the clinical update section from members. These have provided dialogue amongst members of new or evaluated clinical work on the ground, improvements in care, new program developments, etc. It has also enabled members to have clinical work/research published in order to secure grants or other avenues of funding such as scholarships.

#### **Clinical update topics 2016-2017**

- Assisting women to conceive: A clinical update on fertility-awareness
- Developing a culture of research in community nursing
- Delirium
- Using adenosinetriphosphate bioluminescence to validate decontamination for duodenoscopes
- Falls and fall injury in mental health inpatient units for older people
- A balancing act: Maintaining accurate fluid balance charting
- Assisted fertility treatment and the quality of informed consent
- Do aged care nurses perceive more profit equals less autonomy?
- ANMF's aged care staffing and skill mix project
- Ten tips for dressing and securement of IV device wounds
- New psychoactive substances: Coming soon to an ED near you



## **THE FEDERATION**

### **Federal Office Staff**

Federal Secretary - Lee Thomas

Assistant Federal Secretary - Annie Butler

Senior Federal Industrial Officer - Nick Blake

Federal Industrial Officer - Andrew McCarthy

Federal Industrial Research Officer - Debbie Richards

Senior Federal Professional Officer - Julianne Bryce

Federal Professional Officer - Elizabeth Foley

Federal Professional Officer - Julie Reeves

Federal Professional Research Officer and Librarian - Elizabeth Reale

Federal Political Director - Sue Bellino

Federal Education Officer - Jodie Davis

Federal Finance and Compliance Officer - Dorothy Abicic

Federal Finance Officer - Sotiria Ayfantis

Federal Social Media and Digital Officer - Nicole Foote-Lenoir

ANMJ Editor - Kathryn Anderson

ANMJ Journalist - Natalie Dragon

ANMJ Journalist - Robert Fedele

Administrative Officer, Executive Assistant and AJAN (Canberra) - Anne Willsher

Administrative Officer, Executive Assistant and Office Manager (Melbourne) - Kerrie Fitzpatrick

Administrative Officer, Communications and Campaigns - Kristy Male

Administrative Officer, Education - Rebecca Aveyard

Administration Officer, Journals - Cathy Fasciale

Administrative Officer, Industrial - Anna Amatangelo

Administrative Officer, Professional - Anastasia Shianis

Administrative Officer, NENA and NACA Secretariat - Jessica Flaherty [to March 2017]

Administrative Officer, NENA and NACA Secretariat - Louise Young-Wilson [from February 2017]

## **Federal Council**

Federal President, Sally-Anne Jones  
Federal Vice President, Maree Burgess  
[to 31 March 2017]  
Federal Vice President, Lori-anne Sharp  
[from 1 April 2017]  
Federal Secretary, Lee Thomas  
Assistant Federal Secretary, Annie Butler

### Australian Capital Territory

Secretary, Jenny Miragaya  
President, Athalene Rosborough

### New South Wales

Secretary, Brett Holmes  
President, Coral Levett

### Northern Territory

Secretary, Yvonne Falckh  
Acting President, Jan Hercus [to 29 November 2016]  
President, Marlene Herron [from 30 November 2016]

### Queensland

Secretary, Beth Mohle  
President, Sally-Anne Jones

### South Australia

Secretary, Elizabeth Dabars  
President, Marisa Bell

### Tasmania

Secretary, Neroli Ellis  
Acting President, James Lloyd

### Victoria

Secretary, Lisa Fitzpatrick  
President, Maree Burgess

### Western Australia

Secretary, Mark Olson  
President, Patricia Fowler

## **Federal Executive Members**

Federal President, Sally-Anne Jones  
Federal Vice President, Maree Burgess  
[to 31 March 2017]  
Federal Vice President, Lori-anne Sharp  
[from 1 April 2017]  
Federal Secretary, Lee Thomas  
Assistant Federal Secretary, Annie Butler

Australian Capital Territory, Jenny Miragaya  
New South Wales, Brett Holmes  
Northern Territory, Yvonne Falckh  
Queensland, Beth Mohle  
South Australia, Elizabeth Dabars  
Tasmania, Neroli Ellis  
Victoria, Lisa Fitzpatrick  
Western Australia, Mark Olson

## **Federal Council Meetings**

From 1 July 2016 to 30 June 2017

15 July 2016 [in writing]  
4 August 2016 [in writing]  
25 - 26 August 2016  
22 September 2016 [in writing]  
7 November 2016 [in writing]  
3 March 2017 [in writing]  
31 March 2017 [in writing]

## **Federal Executive Meetings**

From 1 July 2016 to 30 June 2017

4 July 2016 [by teleconference]  
24 - 25 November 2016  
16 - 17 February 2017  
5 April 2017 [by teleconference]  
15 - 16 May 2017  
29 June 2017 [by teleconference]



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